CHOCK THE PERSONNELL RESIDENCE OF THE CHARMEN TO LEADING TO SUPPLY THE PROPERTY OF CONFERCE SCOTING BIND SOOD I UNION ON SO PRIORICAL PTOSBOGIJAJ U.S. Poleci and Iradomert Office; U.S. DEPARTMENT OF CONJERCE 10/8/6479 Substitute for Form PTO-875 Blicolive December 6, 2004 APPLICATION AS FILED - PARTI. (Column 1) OTHER THAN Mainin 11 SMALL ENTITY ØR SMALL ENTITY FOR HUMBER FILED HUMBER EXTRA BASIC FEE BATE (\$) FEE AL (37 CFR 1 1841 (W # (c)) NVA H/A EÉE (1) HVA SEARCHFEE 150,00 NIA 131 OFR 1 16/4. 14, 04 1911 300.00 NVA . N/A NA EXAMINATION FEE \$250 NIA (\$7 CFR 1 18(9): (p), or (4)) \$600 NA · N/A TOTAL CLAIMS DT. CER I 18101 NUL \$100 NIA \$200 MINUT 20 . X\$ 26 INDEPENDENT CLAIMS X\$50 ÓŘ C nunim X100 Oot beenes agriffing by a not solved exceed 100 X200 APPLICATION SIZE sheets of paper, the application size fee due FEE THE LIGHT 15. \$250 (\$128 for small entity) for each additional 50 sheets or fraction thereof. See U.8.C. 41(a)(1)(Q) and 37 CFR 1.16(4) MULTIPLE DEPENDENT CLAIM PRESENT OF CER I 1641 +180= 4960m ° ti the difference in column 1 is less then zero, enter °0° in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column t) (Column 2) (Column 3): OTHER THAN SMALL ENTITY OR CLAIMS REMAINING HIGHEST 06 SMALL ENTITY NUMBER PREVIOUSLY PAID FOR PRESENT AFTER MENDMENT RATE (1) AMENDMENT ADDI-RATE (\$) TIONAL pr cra Ligge Minus FEE (4) TION Ŋ FEE X\$ 25 Mapendent . X\$50 Minus. OR 4 X100 Application Size Fee (37 CFR 1.16(s)) X200 **O**E FIRST PRESENTATION OF MILTIPLE DEPENDENT CLAIM D7 CFR 1.1401 +180= +360a OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST 8 REMAINING NUMBER PRESENT AFTER. MENOMENT RATE (\$) PREVIOUSLY PAID FOR ADDI-TIONAL EXTRA RATE (1) ADOIprofes, Legy TIONAL FEE H Mirus EEE (H) X\$ 25 troppindent X\$50 444 ... Minus OR X100 Application 6124 F40 137 OFR 1.16(0)) X200 RO furt presentation of multiple dependent claim (at CFR 1.160) 4100m +860± OR TOTAL TOTAL ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "O' in column 3.

If the "Highest Number Previously Paid For" IN THE SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" IN THE SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" (IN THE SPACE is less than 3, enter "20".

It is "Highest Number Previously Paid For" (IN THE SPACE is less than 3, enter "20".

It collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to the land by the "TO to plocess" an application. Confidentiality is poverned by 35 U.S., 122 and 37 CFR 1.14. This collection is returned to take 12 minutes to complete, buting gathering, preparing, and submitting the completed application to the USPTO. Time will value depending upon the individual cise. Any comments and only in the control of the child information of commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES ON COMPLETED FORMS TO THIS ONES. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.